Comparison Chart for Senior Plans

2015 Benefit	Coordinated Plan	Freedom Plan	UCare for Seniors
Extended Absence or Point of Service	Worldwide coverage	Network benefits outside MN (in USA) up to 9-months	Worldwide coverage for emergencies. 80% coverage for non-emergencies anywhere in the U.S. May be outside service area for up to 6 months.
Inpatient Admissions General Hospitalization	\$200 deductible + 20% of the first \$3000 (\$600) = \$800 per patient per calendar year	100% coverage for unlimited days	\$100 copay per admission, then 100% coverage. See limitation on skilled nursing.
Emergency Services	After Medicare B annual deductible, 100% coverage	\$30 copay or 100% ER visit at network Hospital if admission results	\$50 copay or 100% coverage if admission results
Out of Pocket Maximum	\$800 inpatient, Medicare B deductible and 20% on hearing aids	\$3,000	\$3,400
Preventative care	100% Coverage (no deductible)	100% Coverage	100% Coverage
Eye & Hearing Exam	100% (no deductible) for one routine exam per year	100% coverage	100% Coverage
Physicians Service	Medicare B deductible, then 100%	\$10.00 copay, then 100% coverage	\$15.00 copay, then 100% coverage
Inpatient Hospitalization	\$200 deductible plus 20% of \$3,000 (600) which is \$800 per patient per year.	100% coverage. See limits on skilled nursing, mental health and chemical dependency.	\$100 copay per admission, then 100% coverage. See limitation on skilled nursing.
Hospital Outpatient and Surgery Center	After Medicare B annual deductible, 100% coverage	100% Coverage	100% Coverage
Outpatient Mental Health	After Medicare B annual deductible, 100% coverage	\$10.00 copay or \$5.00 copay for group then 100% Coverage	\$15.00 copay per visit, then 100% coverage
Outpatient Chemical Dependency	After Medicare B annual deductible, 100% coverage	\$10.00 copay, then 100% coverage	\$15.00 copay per visit, then 100% coverage
Chiropractic	After Medicare B annual deductible, 100% coverage	\$10.00 copay, then 100% coverage	100% Coverage for medical approved services with UCare for Seniors Chiropractor.
Physical Therapy	After Medicare B annual deductible, 100% coverage	100% Coverage	100% coverage outpatient setting, after \$15.00 copay per visit
Occupational Therapy	After Medicare B annual deductible, 100% coverage	100% Coverage	100% coverage outpatient setting, after \$15.00 copay per visit
Speech Therapy	After Medicare B annual deductible, 100% coverage	\$10 copay, then 100%	100% Coverage outpatient setting after \$15.00 copay per visit
Home Health –skilled care meeting Medicare approved guidelines	After Medicare B annual deductible, 100% coverage	100% Coverage	100% Coverage
30-day Prescriptions	\$10 Generic	\$10 Generic	\$10 Generic
	\$30 Preferred Brand	\$30 Brand Formulary	\$30 Preferred Brand Name
	\$50 Brand Name	\$50 Non Preferred Brand	\$50 Brand Name
	\$50 for Specialty drugs	\$50 for Specialty drugs	\$50 for Specialty drugs
	25% for supplementary drugs	n/a	Supplemental Rx Covered
Mail Order Available	Yes	Yes	Yes
Prosthetics	100% after the annual Medicare B deductible	90%	100%
Durable Medical Equipment	100% after the annual Medicare B deductible	90% including test strips and syringes for diabetics	80% and 100% for Part B diabetic supplies
Hearing Aid	80% for hearing aids and accessories purchased at BCBS providers every 3-yrs	80% for hearing aids and accessories every 3-yrs	\$500 reimbursement every 36-months at any vendor
Eye Glasses	eyewear discounts available	eyewear discounts available	\$75 allowance toward eyewear per year